#4

BAKER BOTTS LLE

| | | | A34189 (071308.0149) |
|---|----------------------------------|---------------|----------------------|
| OIPE | In re Application of Jens Hamann | | |
| Ilina a | Application Number | 09/848,685 | Filed May 3, 20011 |
| 2 2001 2 9 2001 2 J | For APPARATUS FOR GENERATING | | * see attached |
| THE DEMANA OF | Group Art Unit t/b/a | | Examiner t/b/a |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | | | |
| The requested extension and appropriate non-small-entity fee are as follows (check time period desired): | | | |
| One month (37 CFR 1.17(a) | (1)) | | \$ |
| Two months (37 CFR 1.17(a |)(2)) | | \$ |
| Three months (37 CFR 1.17(a)(3)) \$ | | | \$ |
| Four months (37 CFR 1.17(a)(4)) | | | |
| Five months (37 CFR 1.17(a | ı)(5)) | | \$ |
| Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ A check in the amount of the fee is enclosed. | | | |
| Payment by credit card. Form PTO-2038 is attached. | | | |
| The Commissioner has already been authorized to charge fees in this application to a Deposit Account. | | | |
| The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-4377 I have enclosed a duplicate copy of this sheet. | | | |
| I am the applicant/inventor | | | |
| assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. | | | |
| attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) | | | |
| WARNING: Information on this form may become public Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | |
| June 27, 2001 | _ | Radulat | Prof |
| Date | | Signati | ire ' |
| PTO Reg No.: 27,551 | _ | Bradley B. Ge | eist |
| | | Typed | or printed name |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | |
| Total of forms are submitted | | | |